PTO/SB/17 (05-07)

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Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number MADEM Sctive on 12/08/2004. Complete if Known Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 09/945,378 Application Number FEE TRANSMITTA Filing Date 08-31-2001 For FY 2007 First Named Inventor GRAHAM, ET AL **Examiner Name** BEKERMAN, MICHAEL Applicant claims small entity status. See 37 CFR 1.27 Art Unit 3600 TOTAL AMOUNT OF PAYMENT 250.00 Attorney Docket No. CGR03-GN003 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): ✓ Deposit Account Deposit Account Number: <u>50-3072</u> Deposit Account Name: TAFT STETTINIUS & HOLLIST For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES EXAMINATION FEES Small Entity Small Entity Small Entity Application Type** Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 150 500 200 100 250 Design 200 100 100 50 130 65 Plant 200 100 300 160 150 80 Reissue 300 150 500 600 300 250 Provisional 200 100 0 0 **Small Entity** 2. EXCESS CLAIM FEES Fee (\$) Fee Description <u>Fee (\$)</u> Each claim over 20 (including Reissues) 50 25 200 100 Each independent claim over 3 (including Reissues) Multiple dependent claims 180 **Total Claims** Multiple Dependent Claims Extra Claims Fee Paid (\$) Fee (\$) - 20 or HP = Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Extra Claims Fee Paid (\$) Indep. Cialms Fee (\$) HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Total Sheets Fee Paid (\$) (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): (2402) APPEAL BRIEF 250.00

SUBMITTED BY	>-		
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This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. PTO/SB/21 (04-07)

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Application Number 09/945,378

Filing Date 08-31-2001

First Named Inventor GRAHAM ET AL

Art Unit 3600

Examiner Name BEKERMAN, MICHAEL

		3600					
(to be used for all correspondence after initial filing)	Examiner Name	BEKERMAN, MICH	MICHAEL				
Total Number of Pages in This Submission 45	Attorney Docket Number	CGR03-GN003					
ENCLOSURES (Check all that apply)							
Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request	Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocatio Change of Correspondence A Ferminal Disclaimer Request for Refund CD, Number of CD(s)	Address ITEM	Appea of App Appea (Appea Proprii Status Other below	Allowance Communication to TC al Communication to Board beals and Interferences al Communication to TC al Notice, Brief, Reply Brief) etary Information ELetter Enclosure(s) (please Identify); RETURN POST CARD			
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